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(Requestor's Name) (Address) (Address)	800180702788
(City/State/Zip/Phone #)	
(Document Number) Certified Copies Certificates of Status	10/27/1001006015 **175.00
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October 8, 2010

## RE: PLEASE SEE ATTACHED LIST.

Department of State Division of Corporations Clifton Building 261 Executive Center Circle Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is <u>1</u> check in the amount <u>175.00</u> to cover the required filing fec.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Thereca Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

CONTINOT

RECEIVED 10 OCT 18 AH-8: 42 SECIENCI: OF STATE TALLAHASSEE FLORIDA MARGATE MOOSE LODGE NO.2201, LOYAL ORDER OF MOOSE. (FL. DOM.) PERRY LODGE NO. 2353, LOYAL ORDER OF MOOSE, INC. (FL. DOM.) POINCIANA LODGE NO.2409, LOYAL ORDER OF MOOSE. (FL. DOM.) SOUTH MIAMI LODGE NO. 2229 LOYAL ORDER OF MOOSE, INC. (FL. DOM.) ST. AUGUSTINE LODGE NO. 1017, LOYAL ORDER OF MOOSE, INC. (FL. DOM.)

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned,	C T CORPORATION SYSTEM
· · · · · · · · · · · · · · · · · · ·	(Name of Registered Agent)
hereby resigns as Registered Agent for	ST. AUGUSTINE LODGE NO.1017, LOYAL ORDER
	OF MOOSE_INC(FL_DOM.)
	(Name of Corporation)

738950

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

(Signature of Besigning Agent)

If signing on behalf of an entity:

## C T CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

## Fee for filing this document:

 \$87.50 - Active corporation
 \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 'Tallahassee, FL 32314